

COMPLETE AND SUBMIT ALONG WITH AFFIDAVIT C OR AFFIDAVIT D

In order for the City to determine the Good Faith Effort performed by the bidder, the bidder must list ALL firms contacted to perform subcontract work for the project.

SUBCONTRACT CONTACT SCHEDULE

PRIME CONTRACTOR: _____

PROJECT NAME: _____

DATE: _____

DATE CONTACTED	NAME & ADDRESS OF PERSON/BUSINESS CONTACTED	PHONE NUMBER	SERVICE PROVIDED	PERSON MAKING CONTACT	CERTIFIED MBE/DBE/WBE? YES/NO	RESPONSE	PRICE QUOTED

I HEREBY CERTIFY THAT THE SUBCONTRACTORS LISTED ABOVE WERE CONTACTED BY MY FIRM, AND REQUESTED TO SUBMIT QUOTES ON THE ABOVE REFERENCED PROJECT. ALL INTERESTED SUBCONTRACTORS WERE NEGOTIATED WITH IN GOOD FAITH.

I hereby certify that the above referenced information is true and accurate.

Inaccurate information provided in the bid document will be reported to the North Carolina Attorney Generals office and result in investigations and/or legal action against the bidder.

SIGNED: _____ TITLE: _____ COMPANY: _____